## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

maintenance fee notifica  CURRENT CORRESPOND	a) specifying a new corre	on of maintenance fees will be mailed to the current correspondence address as a correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
	paj						
A: Blair Hugh McDonnell Boo 32nd Floor	chnen Hulbert & Ber		and	ereby certify that this pa	per is bein	ELECTRONIC TRANSM g electronically transmit rginia via EFS-Web on I	ted to the United States Paten
300 S. Wacker Drive Swiss Tanner, P Chicago, IL 60606 P.O. Box 1749			.C.	Sylvia L. Castillo		· · · · · · · · · · · · · · · · · · ·	(Depositor's name)
Cineago, 112 000	•	o. Box 1749 s Altos, CA 94023		Scretti			(Signature)
		03 A1103, CA 34	1023	JM. 27	201	0	(Daie)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/629,368 07/29/2003		Luiz Belardinel		<del>- 02-479-C</del>		)2 <del>-47</del> 9-C—	6263
TITLE OF INVENTION	N: MYOCARDIAL PERI	THOD	045710-1951				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	REV. PAID ISSUE FEE TOTAL FE		DATE DUE
nonprovisional	NO	\$1510	\$300		\$0 \$1		02/01/2010
· · · · · · · · · · · · · · · · · · ·	MINER	ART UNIT	CLASS-SUBCLASS	7		41010	
CRANE, LAWRENCE E		1623	514-046000				
1. Change of correspond	dence address or indication	T	2. For printing on the patent front page, list Swiss Tanner, P.C.				
CFR 1.363).  Change of correspondences	pondence address (or Cha	ange of Correspondence	(1) the names of up to agents OR, alternat	o 3 registered pater	nt attorney	/5 1 000133 14	illier, r.o.
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME /	AND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or ty	ype)			
PLEASE NOTE: Ur	nless an assignee is ident	tified below, no assigned	data will appear on the	patent. If an assign	ee is ider	ntified below, the do	cument has been filed for
(A) NAME OF ASSI		pacton of this form is rec	(B) RESIDENCE: (CIT				
Gilead Palo Alto, Inc. Foster City, California							
Please check the approp	oriate assignce category of	r categories (will not be p	_		orporation	or other private gro	up entity   Government
4a. The following fee(s)	are submitted:		b. Payment of Fee(s): (Ple	ease first reapply a	ny previo	usly paid issue fee s	hown above)
Issue Fee			A check is enclosed.				
	No small entity discount # of Copies	Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-4972 (enclose an extra copy of this form).					
			overpayment, to Dep	osit Account Numb	cr <u>50-49</u>	72 (enclose an	extra copy of this form).
	atus (from status indicate ns SMALL ENTITY stat		b. Applicant is no lo	nger claiming SMA	LL ENTI	TY status. Sec 37 CF	R 1.27(g)(2).
NOTE: The Issue Fee an	nd Publication Fee (if req		ed from anyone other than				assignee or other party in
Authorized Signature	Los	Date_ Jain. 27, 2010					
Typed or printed nam	me Lorna L. Tanne	Registration No. 50,782					
unis form and/or sugges	tions for reducing this bu Virginia 22313-1450. De	iraen, snouia de sent to ti	ne Chief Information Office	cer, U.S. Patent and	Tradema	rk Office, U.S. Depa	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O. or Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.